ALL INFORMATION IS REQUIRED TO BE FROM				^	071170			
APPLICATION FOR A PLACE	ON THE <u>Ce</u>	dar Park, Mi	iy 5201	8	GENER	AL ELECTIO	N BALLOT	
TO: City Secretary/Secretary of Board								
I request that my name be placed on the	above-name	d official ballot as	a candidate	for the office indic	ated belo	w.		
OFFICE SOUGHT (Include any place numb						CATE TERM		
				XI _{FULL}				
City Council, Place	2 SIX					UNEXPIRED		
FULL NAME (First, Middle, Last)				PRINT NAME AS YOU WANT IT TO APPEAR ON THE BALLOT				
Shellie Hayes-MSMahon				Shellie Hayes-McMahon				
PERMANENT RESIDENCE ADDRESS (Do not include a P.O. Box or Rural				PUBLIC MAILING ADDRESS (Campaign mailing address, if available.)				
Route. If you do not have a residence address, describe the address at which you receive personal mail and location of residence.)				Q11. Page 4 PD				
		idence.)	1 014	p bugaint it	a			
816 Boga A Road Cedar Panc, TX 78613				816 Bogart Pd Cedor Park, Tl 78613				
CITY.	CTATE	Laun	OIT!				T =10	
CITY	STATE	ZIP	CITY	- 0 1	-	STATE	ZIP	
Cedar Park	JX	78613	Ceaa	w Parc		T	78613	
PUBLIC EMAIL ADDRESS (If available)	OCCUP	ATION (Do not lea	ave blank)	DATE OF BIRTH			STRATION VUID	
hayesmcmahonforcedarparko gmail: com	2 Fire	t Manage	ח			NUMBER (O	ptional) ²	
gmail: com	70,	go. go.	01 /12		/70			
TELEPHONE CONTACT INFORMATION (O	ptional)	LENGT	H OF CONTI	NUOUS RESIDENC	E AS OF D	ATE APPLICAT	ION SWORN	
Home:			IN STAT	E			M WHICH THE	
Works			,,		OFFICE SOUGHT IS ELECTED ³			
Work:			<u>/6</u> year (s)		15 year (s)			
Cell:			month(s)		ଢ month(s)			
If using a nickname as part of your name	to annear on	the hallot you ar			the follow			
that my nickname does not constitute a		9.7	100			_		
commonly known by this nickname for at								
			SI	-11's staurs	MCul	,		
Before me, the undersigned authority, on	n this day pers	sonally appeared	(name) <u>کا ر</u>	elle truges -	m-ma	hon v	vho being by me	
here and now duly sworn, upon oath says								
"I, (name) Shellie Hoyes-N	1 CMano	n , of	Willia	imson		County,	Texas, being a	
candidate for the office of City (ear that I will supp	ort and de	efend the Cons	stitution and laws	
of the United States and of the State of T								
this state. I have not been finally convicte								
official action. I have not been determine partially mentally incapacitated without t							/ incapacitated or	
partially members and a second		torram aware or	tire riepotis	man, chapter or	,	mem code.		
I further swear that the foregoing statem	ents included	in my application	n are in allth	ings true and corre	ect."			
		V		Day				
		Λ		J YYW				
			16	SIGNATURE O	F CANDID	ATE		
Sworn to and subscribed before me at	1/4///	$/\!$	day	of the	2018	100	LEANN M. QUINN	
	***		0 ,			*	Notary ID # 11692	
Kelmmon. C.	i,		174	Sic		00	Expires July 30, 201	
Signature of Officer Administering Oath ⁴		Title o	f Officer Adr	ministering Oath				
TO BE COMPLETED BY CITY SECRETARY OF	R SECRETARY							
(See Section 1.007)	2/	12/18		Telpy	n. 1			
\mathcal{A}	Date Re	ceived		Signature of Secre	tary			
Voter Registration Status Verified							ra CCD 10 Auli	